

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000030664

Entity Name: L & H FLOORING, INC.

**FILED**  
**Apr 25, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

718 DEL RAY DR  
KISSIMMEE, FL 347583207

**New Principal Place of Business:**

**Current Mailing Address:**

4214 PERSHING POINTE PLACE, APT 7  
ORLANDO, FL 32822

**New Mailing Address:**

FEI Number: 55-2858412

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HERNANDEZ, LAZARO R  
718 DEL RAY DR  
KISSIMMEE, FL 347583207 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HERNANDEZ, LAZARO R  
Address: 718 DEL RAY DR  
City-St-Zip: KISSIMMEE, FL 347583207

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: HERNANDEZ, OMAR  
Address: 5545 WILLOW BEND TRAIL  
City-St-Zip: KISSIMMEE, FL 34758

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAZARO R HERNANDEZ

D

04/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date